Permit #: 20109

county: 13 tes

CONFIDENTIAL UNTIL:

Date Issued: /-/6-96

Date Cancelled:

Date Plugged: 1-16.76

Misc. Form 2	12	11	8	7	6	5	41	4	3 <u>i</u>	3	2	1	OGC FORMS
				2-1-96						1-16-96			Date Received

		core	Analyses
		water	
		core	
		chip	Samples
			,
			Logs
Date Received	ID #	TYPE	
	The real Property lies and the last of the	The second name of the second na	-

Additional Submitted Data:

COMMENTS:

314 368-2195

## Missouri Oil and Gas Council

## Form OGC-3 APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK APPLICATION TO DRILL DEEPEN D PLUG BACK [ for an oil well or gas well Hydrocarbon Test X DATE 1-16-96 Town Oil Co. NAME OF COMPANY OR OPERATOR \_ 16205 W. 287 St. Paola Kansas 66071 Address City State DESCRIPTION OF WELL AND LEASE Name of lease Well number Elevation (ground) Swickhamer 855 WELL LOCATION (give footage from section lines) 700\_ ft. from (N) (\$0 sec. line 200 It from (E) (W) sec. line WELL LOCATION County 39 36 33 Township. Range Bates Nearest distance from proposed location Distance from proposed location to nearest drilling, to property or lease line: completed or applied. for well on the same lease: N/A N/A feet Proposed depth. Drilling contractor, name & address Rotary or Cable Tools Approx. date work will start Town OI1 Co. Rotary 1-16-96 Number of acres in lease Number of wells on lease, including this well, 0 completed in or drilling to this reservoir: ... 0 120 Number of abandoned wells on lease: . producing J If lease, purchased with one or more No. of Wells: N/A injection\_ wells drilled, from whom purchased: Name . inective. Address abendoned Status of Bond ON FILE Blanket Bond XX Amt \_ \$60,000 Single Well Amt. -Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed. N/A Proposed casing program: N/A N/A Approved casing -- To be filled in by State Geologist amt. size wt /ft cem. wt./ft cem. 1, the undersigned, state that I am the . and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the bost of my knowledge Signature. Permit Number: \_ Drillers log required Drill stem test info. required if run Approval Date. E-logs required if run ☐ Semples required Approved By. Core analysis required if run ☐ Samples not required

HuB Note. This Permit not transferable to any other person or to any other location. WATER SAMPLES REQUIRED • Remit two copies to: Missouri Oil and Gas Council P.O. Box 250 Rolla, Mo. 65401 One will be returned for driller's signature



## MISSOURI DEPARTMENT OF NATURAL RESOURCES MISSOURI OIL AND GAS COUNCIL

## PLUGGING RECORD

					ADDRESS					
Town O	il Co				16205 W. 287 St. Paola, KS. 66071					
SE TOWN O	11 00.				WELL NUMBER	PERMIT NUM	BER (OGC-3 OF OG	R (OGC-3 OF OGC-31 NUMBER)		
ckhamer					6	20109				
O' FNL	200' FW	L			39N-33W Bates					
TO DRILL THIS V	WELL WAS FILED II	N NAME OF:	HAS THIS	WELL EVER PRODUCED	CHARACTER OF WELL AT COMP	LETION (INITIA	L PRODUCTION)	DRY?		
m 0	:1 Ca				OIL (BBLS/DAY)	GAS (	MCF/DAY)			
TOWN U				2000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 -	N/.					
6-96	TOTAL DEPTH				GAS (MCF/DAY)		S/DAY)			
which formation	on open to well		content of	each formation	Depth interval of each fo	rmation		lepth of plugs used, giving		
							2 sacks	cement		
		040								
PUT IN WELL (FT)		PULLED OUT		LEFT IN WELL	GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)		PACKERS AND SHOES			
Na Salan										
LED WITH MUD-	LADEN FLUID?			INDICATE DEEPEST FOR	RMATION CONTAINING FRESH WA	TER				
DADDRESS	SES OF ADJA	CENTLE	SE OP	ERATORS OR OWI	NERS OF THE SURFACE					
NAME					ADDRESS			DIRECTION FROM THIS WELL		
					,					
OF DISPOS MUD PIT NTENTS	SAL		N/A							
FILE THIS FORM	N DUPLICATE W	TH (USE REV	ERSE SIDE	FOR ADDITIONAL DETAIL	L)					
	(Company), a	and that I	am auth	orized by said co	mpany to make this repo	of the ort; and tha	at this report w	vas prepared under my		
4	supervision a	na directio	on and I	inal the facts state	ed therein are true, corre	DATE		best of my knowledge.		
Lester	1011	mi	64 C	46						
	CKhamer  Ckhamer  WELL  O'FNL  TOWN O  ONED  6-96  In formation completed which formation of abandonmer  PUT IN V  DADDRESS  NA  OF DISPOSE  MUD PIT  NTENTS  FILE THIS FORM  CATE	CKhamer  WELL O' FNL 200' FW TO DRILL THIS WELL WAS FILED IN  TOWN Oil Co.  INED TOTAL DEPTH 6-96 55'  In formation containing oil or which formation open to well of abandonment. N/A  PUT IN WELL (FT)  DADDRESSES OF ADJA  NAME  OF DISPOSAL MUD PIT NTENTS  FILE THIS FORM IN DUPLICATE W  CATE I, the undersite (Company), a supervision as  Letter Journ	CKHAMER  WELL O' FNL 200' FWL  TO DRILL THIS WELL WAS FILED IN NAME OF:  TOWN Oil Co.  INED TOTAL DEPTH 6-96 55'  In formation containing oil or which formation open to well of abandonment. N/A  PUT IN WELL (FT)  PULLED WITH MUD-LADEN FLUID?  DADDRESSES OF ADJACENT LEARN NAME  OF DISPOSAL NAME  OF D	FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE LAST FILE THIS	FIGURE OF THE SECTION OF THE SECTION OF THE STATE WELL WAS FILED IN NAME OF DIE OR GAS?  TO DRIELT THIS WELL WAS FILED IN NAME OF:  TOWN OIL CO.  TOTAL DEPTH  AMOUNT WELL PRODUCING PRIOR OIL IBBLS. DAY!  Fluid content of each formation of abandonment.  N/A  PUT IN WELL (FT)  PULLED OUT  LEFT IN WELL  (FT)  DADDRESSES OF ADJACENT LEASE OPERATORS OR OW!  NAME  ADDI  OF DISPOSAL  MUD PIT  NYA  FILE THIS FORM IN DUPLICATE WITH JUSE REVERSE SIDE FOR ADDITIONAL DETAIL COmpanyly, and that I am authorized by said co supervision and direction and that the facts state  LECTION TAKEN THE STATE OF THE STATE OF THE STATE  LECTION TO THE SECTION OF THE SECTION OF THE STATE  OF DISPOSAL  MUD PIT  N/A  FILE THIS FORM IN DUPLICATE WITH JUSE REVERSE SIDE FOR ADDITIONAL DETAIL  CATE I, the undersigned, state that I am the part of the state	TOWN 011 CO.  E Ckhamer  WELL MIMMER  G WELL SKETTMEN HALD GRILLOCK A SURVEY  OF PINL 200' FWL  TO DRIBLE THIS WILL WAS FILED IN NAME OF DIL OR GAS?  TOWN 011 CO.  INSD  TOTAL DEPTH  AMOUNT WILL PRODUCING PRIORI TO ABANDONMENT N/A  OIL (BBLS.DAY)  Fluid content of each formation  OF parting CASING (SHOT.  RIPPED, ETC.)  D PUT IN WELL (FT)  PULLED OUT  LEFT IN WELL  (FT)  PULLED OUT  LEFT IN WELL  (FT)  INDICATE DEEPEST FORMATION CONTAINING FRIESH WAS ADDRESS  D ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE  NAME  OF DISPOSAL  MUD PIT  N/A  TILE THIS FORM IN DUPLICATE WITH LUSE REVERSE SIDE FOR ADDITIONAL DETAIL)  CATE  I, the undersigned, state that I am the	TOWN 0:1 Co.    Cockhamer	TOWN 011 Co.    Chammer		